STATE CHILDREN'S HEALTH INSURANCE PROGRAM EQUITY ACT

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Texas (Mr. BURGESS) is recognized for 5 minutes.

Mr. BURGESS. Mr. Speaker, later this week, in our Committee on Energy and Commerce's Subcommittee on Health, we will be having a hearing "Covering called the Uninsured Through the Eyes of a Child, Part Two." Now, having sat through part one of this hearing, a hearing dealing with the reauthorization of CHIP funding this year, I really think the title of the hearing should be "Covering the Uninsured Through the Guise of a Child" because if some deception is implied in that title, indeed, I believe some deception is taking place within the SCHIP program.

Now, most of my colleagues in this body, having heard from medical professionals and hospital groups this past month up here on the Hill, are aware of the need for reauthorizing the Children's Health Insurance Program this year. It is a good program. It has provided needed health insurance to millions of needy children across our country. And both the House and the Senate are discussing funding options. And we are concerned about the rising cost of health care in general but in particular, specifically, the rising cost for the SCHIP program.

Fourteen States are going to expect budgetary shortfalls in their SCHIP program. For some of those States, they are their own worst enemy. They are the reason for their own problem. They are using children's funding to cover adults

In fiscal year 2005, the adult enrollment in the SCHIP program exceeded the number of children enrolled in the program in four States: in Arizona we had over 113,000 adults in the program and just over 88,000 children; in the State of Michigan, over 101,000 adults and under 90,000 children; in Minnesota 35,000 adults and just over 5,000 children; in Wisconsin 108,000 adults, just over 57,000 children.

Now, why does this matter? Well, if you look at what it costs to cover a child versus what it costs to cover an adult, for every dollar you spend on the adult, you only need to spend about 60 cents on the child. They are generally healthier. A dollar spent on children's health insurance goes a lot farther because children tend to be a healthier population, and if you provide them a modicum of preventative care, they are going to be healthier still. And after all, if we can attenuate a disease in its early stages in childhood, we will avoid the larger expenditures of allowing that disease to go on unchecked over

I can think of a number of diseases that would fall into this category. Childhood obesity immediately comes to mind, an area where we need to devote significant time, energy, and resources. But if we are spending the

money elsewhere, we are not going to be able to spend it on the children.

And the real deception, in my mind, is that this is a method of expanding a single-payer government-run health care system through the SCHIP program. And, again, that subverts the entire concept of why this program was created in the first place almost 10 years ago.

I would ask my colleagues to remember a dollar spent on a nonpregnant adult is a dollar that is not spent on a needy child. Indeed, States should prioritize spending on needy children and live within their annual allocations instead of looking to other States from which to take their moneys when their programs run a shortfall.

To ensure that States are not using children-specific funding for nonpregnant adults, I have introduced H.R. 1013, the SCHIP Equity Act. There are four principles to the bill:

It prohibits future HHS approval of any State waiver submitted by a State for SCHIP coverage of nonpregnant adults.

The bill terminates portions of State waivers that HHS has approved that extend coverage to nonpregnant adults.

States must eliminate coverage of nonpregnant adults by January 1, 2008.

And if the coverage of a nonpregnant adult was part of a multipurpose waiver, those components not dealing with the coverage of the nonpregnant adult will remain in effect for the duration of the waiver.

SCHIP has been a success story for so many States, for so many children. I am asking you to consider supporting my bill, H.R. 1013.

I want to remind all Members of Congress that "C" in CHIP stands for "children." Let's keep it that way.

AMERICAN HEART MONTH

The SPEAKER pro tempore. Under a previous order of the House, the gentlewoman from California (Ms. MILLENDER-MCDONALD) is recognized for 5 minutes.

Ms. MILLENDER-McDONALD. Mr. Speaker, let me first offer my warmest thanks to my dear friend and colleague, the gentlewoman from Illinois, who led the debate on the floor today in my absence on my bill that is recognizing this month as American Heart Month. I was told that she did a great job, and I am very grateful to her for that. Traveling from California to Washington sometimes is quite a task, and we appreciate our friends for standing in for us.

Mr. Speaker, I would like to speak briefly in support of this resolution, as heart disease is an issue of great importance to our Nation's health, especially women who many have felt for years that breast cancer was the number one killer for women.

For over 40 years, the Federal Government has recognized February as American Heart Month, and during this time we have made great strides in fighting heart disease in this country. New medical innovations have improved the treatment of heart disease, and public education campaigns have made Americans more aware of the importance of prevention.

Nonetheless, heart disease is still the number one killer of Americans, both men and women. One in three Americans has some form of heart disease, whether it be high blood pressure, coronary heart disease, heart failure, stroke, or congenital cardiovascular defects. And while men are more likely to suffer from heart disease in their lives, women are not far behind.

While women may have a lower incidence of heart disease than men, women with heart disease are less likely to receive the proper preventative, diagnostic, and treatment interventions. This could be due to the fact that medical professionals consider heart disease to be primarily an affliction of men and are therefore slower to recognize it in women.

Additionally, women suffering from a heart attack or angina are more likely to have atypical symptoms. In fact, women with atypical heart attack symptoms who are sent home undiagnosed from the hospital are about twice as likely to die from a heart attack as individuals who are admitted.

Another problem with managing heart disease in women is that most of the research on coronary heart disease has been exclusively or primarily done on men. As a result, test and treatments developed from these studies may be less effective in women. This is why there is an urge to test more women and do more research on coronary heart disease with women.

Mr. Speaker, American Heart Month is a time to remember how far we have come, as well as how far we need to go. Heart disease is not just a man's disease, and one of the next big frontiers in battling heart disease involves improving its management in women. Additionally, men and women alike need to remember that preventing heart disease early is preferable to treating it later. A healthy diet, regular exercise, and avoidance of smoking all reduce a person's risk for heart disease. By enhancing both treatment and prevention of heart disease, we will go a much further way, a long way, to improving the health and the hearts of all Americans.

I urge all of my colleagues to support this legislation when it comes to the floor tomorrow for a vote.

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The SPEAKER pro tempore. Under a previous order of the House, the gentleman from California (Mr. DREIER) is recognized for 5 minutes.

CELEBRATING THE LIFE AND LEGACY OF THE HONORABLE GENE SNYDER

The SPEAKER pro tempore (Mr. ALTMIRE). Under a previous order of

the House, the gentleman from Kentucky (Mr. CHANDLER) is recognized for 5 minutes.

Mr. CHANDLER. Mr. Speaker, I rise tonight to honor the memory of one of our former colleagues who passed away on February 16th of this year. He was a former Member from my home State of Kentucky, and, among other things, had the unusual distinction of representing two different congressional districts in the Commonwealth of Kentucky.

Former Congressman Gene Snyder was a man of steadfast conviction. He could always be counted on to fight for his constituents, and you always knew where he stood on the issues. Congressman Snyder had a way with people and a memorable sense of humor. He loved to tell stories and he used those stories to foster close relationships with Republicans and Democrats alike.

We often talk about a different time in Congress, when Members discussed policy over dinner with their families, when Washington was more cordial, and when there was a sense of kinship among fellow legislators. Gene Snyder was one of those Members committed to fostering that kinship, which is far too rare in these halls today.

Most Kentuckians will remember Gene Snyder by the freeway that bears his name. And while one road certainly doesn't sum up a man, in many ways, it is appropriate. While Gene Snyder was never afraid to vote against what he thought was a wasteful appropriations bill, few Members have fought harder to provide the seeds of economic growth for their home region.

Before Gene Snyder got to Congress, his district faced numerous age-old problems; transportation deficits, traffic issues and flooding from the Ohio River to name a few. I can remember hearing stories about people floating through the streets of Louisville in boats during the historic flood of 1937.

These problems, and many more, were tackled by Gene Snyder. He helped complete the Jefferson County floodwall. He showed great leadership in the construction of a new terminal at Standiford Field in Louisville. And he helped secure funding for the Clay Wade Bailey Bridge in Northern Kentucky, better connecting Covington and Cincinnati and helping to drive economic growth in that region.

There were countless other projects that Congressman Snyder developed, and all the bridges he built, the highways he paved and the buildings he raised have helped provide jobs to thousands of our fellow Kentuckians.

These jobs, and the opportunities that resulted from his efforts, will be Gene Snyder's lasting contribution to the constituents who he took such pride in serving. It is my honor this evening to celebrate Gene Snyder's life and his legacy.

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from North Carolina (Mr. JONES) is recognized for 5 minutes.

(Mr. JONES addressed the House. His remarks will appear hereafter in the Extensions of Remarks.)

HONORING THE LIFE AND SERVICE OF THE HONORABLE GENE SNYDER

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Kentucky (Mr. YARMUTH) is recognized for 5 minutes.

Mr. YARMUTH. Mr. Speaker, like my colleague from Kentucky, I rise to honor former Congressman Gene Snyder. Because we find ourselves both as a Congress and a country working to dig ourselves out of a divisive partisan trench, which in recent years has been characterized by petty attacks and contentiousness, my constituents may be surprised to know that I counted Gene Snyder as a friend.

Gene, who was always more interested in the public than publicity, told me a story about a persistent reporter who badgered him about a meeting he wanted to cover. Gene didn't want the reporter at the meeting and refused to disclose the location. So when Gene spotted the reporter in his rearview mirror tailing him to the meeting, Gene said to heck with it. He told his aide to head for the mountains, and led the reporter on a 100-mile wild goose chase through Virginia.

Now, as a former member of the news media, I won't applaud that tactic, but I admire the competitive spirit it exemplified. In any event, that was the last time that reporter tried to get the best of Gene.

Although Gene and I enjoyed each other's company, you would be hard-pressed to find more than a handful of issues upon which the honorable Gene Snyder and I agreed in the political arena. But political issues are only one part of this job, the other being serving one's constituents.

As far apart as we sat on the ideological spectrum, Gene Snyder's model of constituent service is one I aspire to closely emulate. In his three decades of service, Congressman Snyder set the example of how to serve a district. He set the bar, and he set it high.

When Gene held my seat, we in Louisville knew that we had a representative with an open door and an open ear for all of us. If it concerned our community, no matter, big or small, was unworthy of his attention. He welcomed us warmly, shared a laugh, and left us with a feeling that something would soon be done to address anything from a clerical glitch to the need for a new highway. Inevitably, and remarkably, for an age when distrust of a power-hungry government dominated, the issue would be handled effectively and expediently.

As I now work to institute my own open door policy, I am consistently cognizant that I follow the example set by a predecessor and a friend, Gene Snyder. I look to him has a fervent believer that democracy stems not from

politicians, but from the citizens we represent, and I endeavor to capture that spirit as he did.

Gene Snyder was my representative, he was my friend, and he will be greatly missed. I hope my colleagues will join me in honoring his life and service to his constituents.

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Indiana (Mr. BURTON) is recognized for 5 minutes.

(Mr. BURTON addressed the House. His remarks will appear hereafter in the Extensions of Remarks.)

THE BUDGET, DEBT AND THE BLUE DOG'S IRAQ ACCOUNTABILITY LEGISLATION

The SPEAKER pro tempore. Under the Speaker's announced policy of January 18, 2007, the gentleman from Georgia (Mr. Scott) is recognized for 60 minutes as the designee of the majority leader.

Mr. SCOTT of Georgia. Mr. Speaker, we are gathered here this evening to talk about the budget, to talk about the debt and to talk about the Blue Dogs' Iraqi accountability legislation. This is a very, very important time for us, and we hope that this hour will be illuminating and be very informative for everyone.

We are accustomed having my good friend, MIKE Ross, in this position. MIKE Ross is from Arkansas, and, as we know, there was a tornado that went through there. MIKE Ross and a group of us just came back yesterday from Europe. MIKE Ross had to jump on a plane and go down to Arkansas to see about his constituents, and we want to make sure that we send our prayers down to the folks in Arkansas.

Of course, MIKE knows that we stand ready to help in every way we can to make sure that they get the services that they need. So we are here to carry on.

We have a great lineup and array of Blue Dogs here tonight to carry on and to talk about the budget, we want to talk about the debt, we want to talk about our Iraq resolution that we have before us, and the whole issue of accountability.

Mr. Speaker, as we get started, I want to call your attention to our chart. As you know, one of the hall-marks of the Blue Dogs is fiscal responsibility and accountability. Let's look at the national debt and what it is today.

If we look at it correctly, it is now \$8.773 trillion. The share for each individual in this Nation is \$29,000, and it continues to go up. We want to talk about that tonight. The Blue Dogs have a plan. We want to talk about our 12-point plan to bring down this debt. It is one of the most horrendous areas that we have to deliberate on.

We want to get started with some of our Blue Dogs that are here. First, I